



Government of the District of Columbia
Vincent C. Gray, Mayor
Department of Insurance, Securities and Banking



Chester A. McPherson
Interim Commissioner

Title Individual/Business Entity Financial Responsibility Certification

Pursuant to the provisions of Title 31, Section 5041.02, District of Columbia Code, I hereby certify that:

For Individuals:

☐ My employer, _____, has in full force and effect the following insurance and bond in place, under which I am covered:

An **Errors and Omissions policy or certificate in the amount of \$500,000**, which includes coverage for an insurance producer's delegation of functions. A **Fidelity Bond in the amount of \$250,000**, which covers each employee engaged in the real estate transaction where duties are non-clerical in nature.

☐ I am an independent contractor and have in full force and effect an **Errors and Omissions policy or certificate in the amount of \$500,000** and if I have at least one employee, a **Fidelity Bond in the amount of \$250,000**, which covers each employee engaged in the real estate transaction where duties are non-clerical.

I further certify that to the best of my knowledge all such coverages will be maintained in full force and effect throughout the time I act as a title insurance producer.

For Business Entities:

I, _____ am an authorized signatory for the business entity, and certify that
(name)

_____ has the following insurance and bond coverage:
(name of business entity)

- ☐ 1. An **Errors and Omissions policy or certificate in the amount of \$500,000**, which includes coverage for an insurance producer's delegation of functions.
- ☐ 2. A **Fidelity Bond in the amount of \$250,000**, which covers each employee engaged in the real estate transaction where duties are non-clerical in nature.
- ☐ 3. For Business Entities and Individuals, a **Surety Bond in the amount of \$200,000**, which guarantees the faithful performance of the principal.

I further certify that all such coverages will be maintained in full force and effect throughout the time the business entity is licensed as a title insurance producer.

I understand that these requirements are subject to further verification by the Department of Insurance, Securities and Banking at its discretion, and I agree to provide satisfactory evidence of such coverages upon request.

Typed or Printed Name of Agent/Agency

Date

Signature